FEC FORM 1

STATEMENT OF ORGANIZATION

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FORM 1	ORGANIZATION			FEC MAIL CENTER Office Use Only	
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M		
Greenleaf for Co	ongress				
ADDRESS (number and street)	525 Windward	Point Ct			
(Check if address is changed)	Columbia		SC	29212	
		CITY	STATE	ZIP CODE	
COMMITTEE'S E-MAIL ADDRE (Check if address is changed)		-mail address) dgreenleaf.com	 		
COMMITTEE'S WEB PAGE AD			·		
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2. DATE 01" '30	0° ′ 2014°				
3. FEC IDENTIFICATION N	UMBER C				
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)			
I certify that I have examined t	his Statement and to the best	of my knowledge and belief it	t is true, correc	t and complete.	
Type or Print Name of Treasure	Sharon E Ma	ınn			
Signature of Treasurer	Shain e s	Marin	Date 01	* / 30° / 2014 *	
NOTE: Submission of false, erron	•	may subject the person signing of the control of th		the penalties of 2 U.S.C. §437g.	
Office Use		For further information of Federal Election Commissi Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)	